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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MARYLAND	_	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Latanya First name D	First name
	Bring your picture identification to your meeting with the trustee.	Middle name Crosby Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8369	

Debtor 1 Latanya D Crosby

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
		EINs	EINs
5.	Where you live	9716 Lake Point Court #301,	If Debtor 2 lives at a different address:
		Upper Marlboro, MD 20774 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Prince Georges County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Del	otor 1 Latanya D Crosby				Case number (if known)	
Pai	Tell the Court About	Your Bankruptcy	Case			
7.	The chapter of the Bankruptcy Code you are		a brief description of each, s so, go to the top of page 1 ar		by 11 U.S.C. § 342(b) for Individuals Filing for Bankrup late box.	otcy
	choosing to file under	☐ Chapter 7				
		☐ Chapter 11				
		☐ Chapter 12				
		Chapter 13				
8.	How you will pay the fee	about how order. If yo	you may pay. Typically, if yo	ou are paying the fee	eck with the clerk's office in your local court for more of yourself, you may pay with cash, cashier's check, or nebalf, your attorney may pay with a credit card or check	money
					otion, sign and attach the Application for Individuals to	Pay
		•	Fee in Installments (Official that my fee be waived (You	•	ion only if you are filing for Chapter 7. By law, a judge	mav.
		but is not	required to, waive your fee, a	ind may do so only if y	your income is less than 150% of the official poverty li	ine that
					e in installments). If you choose this option, you must f fficial Form 103B) and file it with your petition.	III out
9.	Have you filed for	■ No.			_	
	bankruptcy within the	_				
	last 8 years?	☐ Yes.	-1	VA/In a re	Cooper sound on	
		Distri		When	Case number	
		Distri		When When	Case number	
		Distri	Ct	when	Case number	
10.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		Debt	or		Relationship to you	
		Distr	ct	When	Case number, if known	
		Debt	or		Relationship to you	
		Distri	ct	When	Case number, if known	
11.	Do you rent your residence?	■ No. Go	to line 12.			
		☐ Yes. Has	your landlord obtained an e	viction judgment agair	nst you and do you want to stay in your residence?	
			No. Go to line 12.			
			Yes. Fill out <i>Initial Stater</i> bankruptcy petition.	nent About an Eviction	n Judgment Against You (Form 101A) and file it with the	his

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טפט	tor 1 Latanya D Crosby	1		Case number (if known)
Part	Report About Any Bu	sinesses	You Own as a Sole Prop	rietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of b	pusiness
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if a	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, S	State & ZIP Code
	it to this petition.		Check the appropriate	box to describe your business:
	•			usiness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset R	eal Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (a:	s defined in 11 U.S.C. § 101(53A))
			☐ Commodity Bro	oker (as defined in 11 U.S.C. § 101(6))
			☐ None of the ab	ove
13.	Bankruptcy Code and are op you a small business in debtor?		ns, cash-flow statement, ar S.C. 1116(1)(B).	are a small business debtor, you must attach your most recent balance sheet, statement of ad federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Cl	napter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapt Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapt	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: Report if You Own or	Have An	v Hazardous Property or	Any Property That Needs Immediate Attention
	Do you own or have any	■ No.	,,,	
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs		If immediate attention is	2
	immediate attention?		needed, why is it needed	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	go			Number, Street, City, State & Zip Code

Debtor 1 Latanya D Crosby

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Latanya D Crosby	1		Case numb	Per (if known)
Par	t 6: Answer These Quest	ions for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are deersonal, family, or household purpose."	fined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		business debts? Business debts are debts vestment or through the operation of the bu	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or busine	ess debts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapt	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7 are paid that funds will be	 To you estimate that after any exempt pro available to distribute to unsecured creditors 	perty is excluded and administrative expenses
	administrative expenses		□No		
	are paid that funds will be available for		□Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do	■ 1-49		1 ,000-5,000	□ 25,001-50,000
	you estimate that you owe?	□ 50-99		<u></u> 5001-10,000	<u> </u>
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000
19.	How much do you	□ \$0 - \$9	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,00	01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
20.	How much do you	□ \$0 - \$5	- 1	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
Par	t 7: Sign Below				
For	you	I have ex	amined this petition, and I d	leclare under penalty of perjury that the info	rmation provided is true and correct.
				r 7, I am aware that I may proceed, if eligible e relief available under each chapter, and I c	
				d not pay or agree to pay someone who is n the notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this
		I request	relief in accordance with the	e chapter of title 11, United States Code, spo	ecified in this petition.
		bankrupto and 3571	cy case can result in fines u	nt, concealing property, or obtaining money p to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519
		Latanya	nya D Crosby D Crosby of Debtor 1	Signature of Debt	or 2
		Executed	on November 10, 201		M / DD / YYYY

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Debtor 1 Latanya D Crosby Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David H	I. Sandler	Date	November 10, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
David H. S	andler		
David H. S	andler & Associates		
Firm name			
8401 Corp	orate Drive		
Suite 620			
Landover,	MD 20785		
Number, Street,	City, State & ZIP Code		
Contact phone	301-429-0022	Email address	davidsandler@msn.com
12935			
Bar number & St	ate		

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Eill	in this information to identify your acc					
	in this information to identify your cas	se:				
Deb	tor 1 Latanya D Crosby First Name	Middle Name	Last Name			
Deb	otor 2					
(Spo	use if, filing) First Name	Middle Name	Last Name			
Uni	ed States Bankruptcy Court for the:	DISTRICT OF MARYLA	ND			
Cas	e number					
(if kn	own)				_	if this is an
					ameno	led filing
	_					
	ficial Form 106Sum					
	mmary of Your Assets an				-	2/15
	s complete and accurate as possible. mation. Fill out all of your schedules to					
	original forms, you must fill out a new				<i>5</i> u 00110 u u1	oo antor you mo
Par	11: Summarize Your Assets					
					Your as	esate
						f what you own
1.	Schedule A/B: Property (Official Form					405 450 00
	1a. Copy line 55, Total real estate, from	Schedule A/B			\$	135,470.00
	1b. Copy line 62, Total personal proper	ty, from Schedule A/B.			\$	51,512.00
	1c. Copy line 63, Total of all property or	n Schedule A/B			\$	186,982.00
Par	2: Summarize Your Liabilities					
ıaı	Julillarize Tour Liabilities					
					Your lia	ibilities you owe
_	Cabadula Di Cuaditana Mha Hava Clain	an Canara d bu Duna a di	(O#:-:- F 100D)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2.	Schedule D: Creditors Who Have Clain 2a. Copy the total you listed in Column			f Part 1 of Schedule D	\$	110,480.00
3.	Schedule E/F: Creditors Who Have Uni					0.00
	3a. Copy the total claims from Part 1 (p	priority unsecured claim	ns) from line 6e of Schedule E	E/F	\$	0.00
	3b. Copy the total claims from Part 2 (r	nonpriority unsecured o	laims) from line 6j of Schedu	le E/F	\$	1,793.00
				Your total liabilities	\$	112,273.00
Par	3: Summarize Your Income and Ex	penses				
4.	Schedule I: Your Income (Official Form				\$	2,294.69
	Copy your combined monthly income fr	om line 12 of Schedule	· I		Ψ	2,234.03
5.	Schedule J: Your Expenses (Official Fo Copy your monthly expenses from line				\$	2,103.00
Par	4: Answer These Questions for Ad	ministrative and Stat	istical Records			
6						
6.	Are you filing for bankruptcy under O No. You have nothing to report on		heck this box and submit this	form to the court with you	ur other sch	edules.
	Yes					
7.	What kind of debt do you have?					
	Your debts are primarily consur household purpose." 11 U.S.C. §				a personal,	family, or
	Your debts are not primarily cor the court with your other schedule:		ve nothing to report on this pa	art of the form. Check this	box and su	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Latanya D Crosby Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,291.40

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

			Jase 17-25	127 L	JOC 1 F	iled 11/10/17 P	age 10 of	r 4 1		
Fill	in this informa	ation to identif	y your case and	this filing	g:					
Deb	otor 1	Latanya D (dle Name		Last Name				
	otor 2 use, if filing)	First Name	Mid	dle Name		Last Name				
Unit	ted States Banl	kruptcy Court fo	or the: DISTRIC	T OF MA	RYLAND					
Cas	e number					_				Check if this is an amended filing
		m 106A/I	3 roperty							12/15
			<u> </u>	st an asset	t only once. If	an asset fits in more than o	ne category, li	st the asset in	the cat	
infor	mation. If more s ver every questi	space is needed on.	, attach a separate	sheet to t	his form. On tl	le are filing together, both a he top of any additional pag wn or Have an Interest In	es, write your	name and case	numb	er (if known).
_	No. Go to Part 2									
1.1	-	Point Court # available, or other de			Single-family Duplex or mu	ty? Check all that apply home ulti-unit building n or cooperative	the amoun	t of any secure	d claims	exemptions. Put s on <i>Schedule D:</i> ured by Property.
	Upper Mari	boro MD	20774-0000			d or mobile home	entire pro			ent value of the on you own?
	City	State	ZIP Code	□ □ Who	Timeshare Other	st in the property? Check one	Describe (\$135,470.00 nership interest the entireties, or
	Prince Geo	rges								
	County				Debtor 1 and	Debtor 2 only of the debtors and another you wish to add about this i	(see in	k if this is com structions) ocal	munity	property

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Street address, if available, or other description City State ZIP Code	That is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Tho has an interest in the property? Check one Debtor 1 only	Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$0.00	d claims on Schedule D: ms Secured by Property. Current value of the
Street address, if available, or other description City State ZIP Code	Investment property Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Cho has an interest in the property? Check one	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00	d claims on Schedule D: ms Secured by Property. Current value of the
City State ZIP Code	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Cho has an interest in the property? Check one	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00	d claims on Schedule D: ms Secured by Property. Current value of the
City State ZIP Code	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Cho has an interest in the property? Check one	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00	d claims on Schedule D: ms Secured by Property. Current value of the
, 	Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Cho has an interest in the property? Check one	Current value of the entire property?	Current value of the
, 	Manufactured or mobile home Land Investment property Timeshare Other //ho has an interest in the property? Check one	entire property?	
, 	Land Investment property Timeshare Other Tho has an interest in the property? Check one	entire property?	
, 	☐ Investment property ☐ Timeshare ☐ Other //ho has an interest in the property? Check one	entire property?	
, 	Timeshare Other /ho has an interest in the property? Check one	\$0.00	portion you own?
, 	Timeshare Other /ho has an interest in the property? Check one	<u> </u>	\$0.0
	Other //ho has an interest in the property? Check one	Describe the nature of v	
	_	(such as fee simple, ten	our ownership interest
	_	a life estate), if known.	uncy by the charenes, e
County	_ ,		
County	☐ Debtor 2 only	-	
	Debtor 1 and Debtor 2 only		
	☐ At least one of the debtors and another	Check if this is com	munity property
	ther information you wish to add about this it	(,	
	roperty identification number:	eili, sucii as local	
you own, lease, or have legal or equitable interest in neone else drives. If you lease a vehicle, also report it can cars, vans, trucks, tractors, sport utility vehicles, mandal No	n Schedule G: Executory Contracts and U		
■ Yes 1 Make: Honda who h	interest in the manual 2	Do not deduct secured cl	
Oissil —	as an interest in the property? Check one	the amount of any secure	aims or exemptions. Put
		0 "	ed claims on Schedule D:
	tor 1 only	Creditors Who Have Clair	ed claims on Schedule D:
	tor 2 only	Current value of the	ed claims on Schedule D: ms Secured by Property. Current value of the
Approximate mileage: 6500 Deb	tor 2 only tor 1 and Debtor 2 only		ed claims on Schedule D: ms Secured by Property.
Approximate mileage: 6500 Deb	tor 2 only	Current value of the	ed claims on Schedule D: ms Secured by Property. Current value of the

D	ebtor 1	Latanya D C	rosby Case number	(if known)
6.		nold goods and follows: Major applian	urnishings ces, furniture, linens, china, kitchenware	
	_	Describe		
				1
			space heater, 3 bedspreads/blankets, 4 pillows, 5 sets of sheets, 9 throw rugs, 20 towels, queen size bed, daybed, bedroom set, coffee table, desk, dining room set, dresser, end table, 3 lamps, pots, pans, microwave, toaster, blender, coffee maker, sofa, loveseat, table, 2 chairs, ironing board, vacuum cleaner	\$510.00
_				<u> </u>
7.	□ No	les: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners phones, cameras, media players, games	; music collections; electronic devices
			radio, DVD player, 3 televisions, desktop computer	\$480.00
_			Tradie, 212 player, e televisiene, acomep compare.	
8.			figurines; paintings, prints, or other artwork; books, pictures, or other art objects; sta ons, memorabilia, collectibles	ımp, coin, or baseball card collections;
	☐ Yes.	Describe		
9.		nent for sports ar les: Sports, photo musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
	_	Describe		
10	. Firearr			
10			s, shotguns, ammunition, and related equipment	
	■ No			
	⊔ Yes.	Describe		
11	□ No	<i>ples:</i> Everyday clo	othes, furs, leather coats, designer wear, shoes, accessories	
	Yes.	Describe		
			2 bathrobes, 15 blouses, undergarments, 10 coats, 10 dresses, 3 pairs of jeans, 20 handbags, 5 hats, 10 jackets, nightgowns, 50 pairs of shoes, 10 skirts, 12 pairs of slacks, socks, 4 sweaters, prescription glasses, gloves, belts	\$210.00
12	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches	s, gems, gold, silver
			gold bracelet, gold earrings, 9 watches	\$230.00
_				
13		arm animals ples: Dogs, cats, l	pirds, horses	
	☐ Yes.	Describe		
14	. Any ot ■ No	ther personal and	d household items you did not already list, including any health aids you did n	ot list

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De	btor 1	Latanya D Crosby	Case number (if known)	
I	☐ Yes.	Give specific information		
15.		the dollar value of all of your entries from Part 3. Write that number here	t 3, including any entries for pages you have attached	\$1,430.00
Par	t 4: De	scribe Your Financial Assets		
Do	you ow	vn or have any legal or equitable interest in ar	ny of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
[□ No Î		e, in a safe deposit box, and on hand when you file your petition	on
ı	Yes		Cash	\$10.00
			Casii	φ10.00
	-	its of money oles: Checking, savings, or other financial accour institutions. If you have multiple accounts w	nts; certificates of deposit; shares in credit unions, brokerage hith the same institution, list each.	nouses, and other similar
ı	Yes		Institution name:	
		17.1.	BB&T Acct. Acct. No.xxxx	\$367.00
ļ	Examp ■ No	, mutual funds, or publicly traded stocks oles: Bond funds, investment accounts with broke Institution or issuer na	Ç , ,	
_		ublicly traded stock and interests in incorpora enture	ated and unincorporated businesses, including an interes	t in an LLC, partnership, and
I	☐ Yes.	Give specific information about them Name of entity:	 % of ownership:	
	Negoti	nment and corporate bonds and other negotia iable instruments include personal checks, cashic egotiable instruments are those you cannot trans	ers' checks, promissory notes, and money orders.	
		Give specific information about them Issuer name:		
I	<i>Examp</i> □ No		B(b), thrift savings accounts, or other pension or profit-sharing	plans
ı	Yes.	List each account separately. Type of account:	Institution name:	
			Allianz	\$40,000.00
_	Your s		nat you may continue service or use from a company ablic utilities (electric, gas, water), telecommunications compar	ies, or others
			Institution name or individual:	
	Annuit ■ No	ies (A contract for a periodic payment of money	to you, either for life or for a number of years)	

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De	ebtor 1	Latanya D	Crosby	Case number (if known)	
	☐ Yes		Issuer name and description.		
24.			ation IRA, in an account in a qualified ABLE program, (), 529A(b), and 529(b)(1).	or under a qualified state tuition prograi	n.
	■ No □ Yes		Institution name and description. Separately file the recor	ds of any interests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or	future interests in property (other than anything listed	in line 1), and rights or powers exercis	able for your benefit
	☐ Yes.	Give specific	information about them		
			, trademarks, trade secrets, and other intellectual prop lomain names, websites, proceeds from royalties and licen		
		Give specific	information about them		
27.			s, and other general intangibles permits, exclusive licenses, cooperative association holding	gs, liquor licenses, professional licenses	
	☐ Yes.	Give specific	information about them		
Me	oney or p	property owe	d to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu	unds owed to	o you		
	_	Give specific i	nformation about them, including whether you already filed	d the returns and the tax years	
29.	_ '		or lump sum alimony, spousal support, child support, mair	ntenance, divorce settlement, property sett	ement
	■ No □ Yes. 0	Give specific i	nformation		
30.		les: Unpaid w	eone owes you ages, disability insurance payments, disability benefits, sic unpaid loans you made to someone else	ck pay, vacation pay, workers' compensati	on, Social Security
		Give specific	information		
31.		t s in insuran d <i>les:</i> Health, di	ce policies isability, or life insurance; health savings account (HSA); c	redit, homeowner's, or renter's insurance	
		Name the insu	urance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund
				Beneficiary.	value:
32.	If you a		erty that is due you from someone who has died ciary of a living trust, expect proceeds from a life insurance	policy, or are currently entitled to receive	property because
	■ No □ Yes.	Give specific	information		
33.			I parties, whether or not you have filed a lawsuit or mas, employment disputes, insurance claims, or rights to sue	de a demand for payment	
	■ No □ Yes.	Describe eac	h claim		
34.	Other c	ontingent an	d unliquidated claims of every nature, including count	erclaims of the debtor and rights to set	off claims
	■ No □ Yes.	Describe eac	h claim		

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Debt	tor 1 Lata	nya D Crosby		Case number (if known)	
_	Any financial I _{No}	assets you did not already list			
	Yes. Give s	pecific information			
36.		ar value of all of your entries from Part 4, includi			\$40,377.00
Part	5: Describe A	ny Business-Related Property You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. D	o you own or h	ave any legal or equitable interest in any business-rela	ted property?		
	No. Go to Part	6.			
	Yes. Go to line	38.			
Part		ny Farm- and Commercial Fishing-Related Property Your have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. C	Do you own o	r have any legal or equitable interest in any farm	- or commercial fishin	g-related property?	
	No. Go to Pa	art 7.			
	Yes. Go to I	ine 47.			
Part	7: Descr	ibe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	Examples: Se	other property of any kind you did not already list ason tickets, country club membership	1?		
	No Yes. Give sp	ecific information			
54.	Add the doll	ar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part	8: List the	Totals of Each Part of this Form			
55.	Part 1: Total	real estate, line 2			\$135,470.00
56.	Part 2: Total	vehicles, line 5	\$9,705.00	_	
57.	Part 3: Total	personal and household items, line 15	\$1,430.00		
58.	Part 4: Total	financial assets, line 36	\$40,377.00		
59.	Part 5: Total	business-related property, line 45	\$0.00		
60.	Part 6: Total	farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total	other property not listed, line 54	\$0.00		
62.	Total persor	al property. Add lines 56 through 61	\$51,512.00	Copy personal property total	\$51,512.00
63.	Total of all p	roperty on Schedule A/B. Add line 55 + line 62			\$186,982.00

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	l in this information to id	entify your case:					
De	btor 1 Latanya First Name	a D Crosby	Middle Name	L	ast Name		
	btor 2						
(Sp	ouse if, filing) First Name		Middle Name	L	ast Name		
Un	ited States Bankruptcy Co	urt for the: DIST	RICT OF MARYLAND				
	se number					_	
(If K	nown)						Check if this is an amended filing
_	(f)	^				_	J. T.
	fficial Form 106						
S	chedule C: T	he Prope	rty You Cla	im	as Exempt		4/16
For special sp	property you listed on Sch ded, fill out and attach to t e number (if known). each item of property you cific dollar amount as ex applicable statutory lim ds—may be unlimited in mption to a particular do he applicable statutory a rt 1: Identify the Property Which set of exemption You are claiming state You are claiming feder For any property you lis Brief description of the pro	edule A/B: Property his page as many co ou claim as exempt tempt. Alternatively it. Some exemption dollar amount. Ho follar amount and th mount. erty You Claim as E s are you claiming and federal nonbar ral exemptions. 11 et on Schedule A/B eperty and line on	ty (Official Form 106A/B) opies of Part 2: Additionally opies opie	e amore amore amore amore the amore amore the amore am	ther, both are equally responsible for source, list the property that you ge as necessary. On the top of any count of the exemption you claim. It market value of the property be thaids, rights to receive certain in a notion of 100% of fair market valuetermined to exceed that amount our spouse is filing with you. S.C. § 522(b)(3) fill in the information below.	One way of sing exempt benefits, ander a late, your exer	empt. If more space is pages, write your name and doing so is to state a ted up to the amount of d tax-exempt retirement aw that limits the
	Schedule A/B that lists this		current value of the portion you own Copy the value from Schedule A/B		eck only one box for each exemption.	Specific ia	ws that allow exemption
	space heater, 3 beds	preads/blankets,		_	\$510.00	Md. Cod	le Ann., Cts. & Jud.
	4 pillows, 5 sets of sirugs, 20 towels, queedaybed, bedroom set desk, dining room set table, 3 lamps, pots, microwave, toaster, I maker, sofa, Line from Schedule A/B:	en size bed, , coffee table, t, dresser, end pans, blender, coffee		_	100% of fair market value, up to any applicable statutory limit	Proc. § ′	11-504(b)(4)
	radio, DVD player, 3 desktop computer	elevisions,	\$480.00		\$480.00		le Ann., Cts. & Jud. 11-504(b)(4)
	Line from Schedule A/B:	7.1			100% of fair market value, up to any applicable statutory limit		
	2 bathrobes, 15 blou- undergarments, 10 c		\$210.00		\$10.00		le Ann., Cts. & Jud. 11-504(b)(4)
	3 pairs of jeans, 20 h 10 jackets, nightgow shoes, 10 skirts, 12 p socks, 4 sweaters, pi glasses, gloves, belt: Line from Schedule A/B:	andbags, 5 hats, ns, 50 pairs of pairs of slacks, rescription s			100% of fair market value, up to any applicable statutory limit	1100.3	30-(13)(-1)

Official Form 106C

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De	otor 1 Latanya D Crosby			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Crie	ck only one box for each exemption.	
	2 bathrobes, 15 blouses, undergarments, 10 coats, 10 dresses,	\$210.00		\$200.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
	3 pairs of jeans, 20 handbags, 5 hats, 10 jackets, nightgowns, 50 pairs of shoes, 10 skirts, 12 pairs of slacks, socks, 4 sweaters, prescription glasses, gloves, belts Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	C C C C C C C C C C C C C C C C C C C
	gold bracelet, gold earrings, 9 watches	\$230.00		\$230.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	3 3 3 3 3 3 3 3 3 3
	Cash Line from Schedule A/B: 16.1	\$10.00		\$10.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
				100% of fair market value, up to any applicable statutory limit	
	BB&T Acct. Acct. No.xxxx	\$367.00		\$367.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	3 3 3 3 3 3 3 3 3 3
	Allianz Line from Schedule A/B: 21.1	\$40,000.00		\$40,000.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(h)
				100% of fair market value, up to any applicable statutory limit	5 ()
	Awaiting funds from Allianz retirement approximately \$8,000.00	\$0.00		\$5,000.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
	Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit	
	Line from Schedule A/B: 1.2			\$0.00	
				100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3			led on or after the date of adjustmen	t.)
	■ No	-		,	
	Yes. Did you acquire the property covered	d by the exemption wi	thin 1	,215 days before you filed this case?	•
	□ No				
	☐ Yes				

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Fill in this inform	-4i 4 id4i6					
FIII In this informa	ation to identify you	Ir case:				
Debtor 1	Latanya D Cros		Last Name			
Debtor 2	First Name	Middle Name	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	kruptcy Court for the:	DISTRICT OF MARYLAND				
Officed States Barri	kruptcy Court for the.	DISTRICT OF WIARTEAND				
Case number						
(if known)						if this is an
					ameno	ed filing
Official Form	106D					
		Who Have Claims	Socuro	d by Proport	V	12/15
3CHEGGIE I	J. Creditors	WIID Have Claims	<u> </u>	a by Propert	<u>y </u>	12/15
		If two married people are filing togetl out, number the entries, and attach it				
number (if known).	Additional Page, fill it	out, number the entries, and attach it	to this form. O	in the top of any additio	nai pages, write your nai	ne and case
1. Do any creditors h	ave claims secured by	y your property?				
☐ No. Check t	this box and submit t	his form to the court with your other	r schedules. Y	ou have nothing else t	o report on this form.	
Yes Fill in a	all of the information	helow		· ·	•	
		below.				
	Secured Claims			Column A	Column B	Column C
		more than one secured claim, list the cre a particular claim, list the other creditor		Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's nan		Do not deduct the	that supports this	portion
2.1 Capital One	e Auto Finance	Describe the property that secures	the claim:	value of collateral. \$11,144.00	claim \$9,705.00	If any \$1,439.00
Creditor's Name	o Auto i manoc	2014 Honda Civil 6500 miles	1	<u> </u>	Ψο,ι σοίσο	Ψ1,400.00
Attn: Gene	ral					
	dence/Bankru	As of the date you file, the claim is:	Chock all that			
ptcy Po Box 302	985	apply.	CHECK all that			
	city, UT 84130	☐ Contingent				
	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as	mortgage or sec	cured		
Debtor 2 only		car loan) 				
Debtor 1 and Deb	,	Statutory lien (such as tax lien, me	echanic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this clai		☐ Other (including a right to offset)				
	Opened					
	06/14 Last Active					
Date debt was incur		Last 4 digits of account num	nber 1001			
						
Lake Point	e at Towne					
Centre Cor	ndo	Describe the property that secures	the claim:	\$6,680.00	\$135,470.00	\$0.00
Creditor's Name		9716 Lake Point Court #301				
c/o Linda N		Marlboro, MD 20774 Prince Georges County	•			
7600 Hano	ver Pkwy	As of the date you file, the claim is:	Check all that			
Suite 202 Greenbelt,	MD 20770	apply.				
	City, State & Zip Code	☐ Contingent				
Number, Street, C	σις, σιαιό α Σιρ συμέ	☐ Unliquidated☐ Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or sec	cured		
Debtor 2 only		car loan)				
☐ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the	e debtors and another	■ Judgment lien from a lawsuit				

Official Form 106D

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Debtor 1 Latanya D Crosby		Case number (if know)	
First Name	Middle Name Last Name		
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset) _		_
Date debt was incurred	Last 4 digits of account numb	oer	
2.3 Nationstar Mortgage L	LC Describe the property that secures the	the claim: \$92,656.00 \$135,470.00 \$0	0.00
Creditor's Name	9716 Lake Point Court #301,	Upper	
Attn: Bankruptcy 8950 Cypress Waters Blvd Coppell, TX 75019	Marlboro, MD 20774 Prince Georges County As of the date you file, the claim is: Capply. ☐ Contingent	Check all that	
Number, Street, City, State & Zip Co			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.		
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as m car loan)	nortgage or secured	
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)	
☐ At least one of the debtors and ar	nother U Judgment lien from a lawsuit		
☐ Check if this claim relates to a community debt	Other (including a right to offset)		_
Opene 12/03 I Active	Last	her 3571	
Date debt was incurred 9/29/17	Last 4 digits of account numb	DEL 2011	
Add the dollar value of your entri	ies in Column A on this page. Write that numb	ber here: \$110,480.00	
If this is the last page of your for Write that number here:	m, add the dollar value totals from all pages.	\$110,480.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			_				- 0			
Fill in t	his inforn	nation to identify your	case:							
Debtor	1	Latanya D Crosb	•							
Dobtor	0	First Name	Middle N	ame	Last Name					
Debtor (Spouse if		First Name	Middle N	ame	Last Name					
United	States Bar	nkruptcy Court for the:	DISTRICT	OF MARYLAND						
Case n	_			_						Check if this is an
(ii kilowii)									_	amended filing
Officia	al Form	n 106E/F								
Sche	dule E	/F: Creditors W	/ho Have	Unsecured	Claims					12/15
any exec Schedule Schedule left. Attac name and Part 1:	eutory control e G: Execute e D: Credito ch the Con d case nun List Al	racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec tinuation Page to this pag nber (if known). I of Your PRIORITY Un	that could rest bired Leases (O cured by Proper ge. If you have in nsecured Clai	ult in a claim. Also ifficial Form 106G). I ty. If more space is no information to re	list executory of Do not include needed, copy	ontracts any credi the Part y	on Sche itors wit ou need	edule A/B: P h partially so I, fill it out, r	roperty (Offic ecured claims number the er	s that are listed in stries in the boxes on the
_	any credito No. Go to Pa	rs have priority unsecure	ed claims again:	st you?						
		art 2.								
Part 2:		l of Your NONPRIORIT								
_	•	rs have nonpriority unse	_	•						
		re nothing to report in this p	part. Submit this	form to the court with	your other sche	edules.				
	Yes.									
unse	ecured clain one credito	nonpriority unsecured c n, list the creditor separatel or holds a particular claim,	ly for each claim.	For each claim listed	d, identify what t	ype of cla	im it is. [Do not list cla	ims already in	cluded in Part 1. If more
										Total claim
4.1		er Financial		Last 4 digits of acc	count number	2148		_		\$1,793.00
	, ,	Creditor's Name				Open	ed 08/	13 Last A	ctive	
	Po Box New Alk	3025 pany, OH 43054		When was the deb	t incurred?	1/08/1				_
-		reet City State Zlp Code		As of the date you	file, the claim i	is: Check	all that a	ipply		
	Debtor	1 only		☐ Contingent						
	☐ Debtor	•		☐ Unliquidated						
	_	1 and Debtor 2 only		☐ Disputed						
	_	t one of the debtors and an	other	Type of NONPRIOR	RITY unsecured	d claim:				
		if this claim is for a com		Student loans						
	debt	ii tiiis ciaiiii is ioi a coiii	inumity	Obligations arisin	ng out of a sepa	ration agr	reement	or divorce tha	at you did not	
		m subject to offset?		report as priority cla						
	■ No			Debts to pension			and other	similar debts	3	
	☐ Yes			Other. Specify	Credit Card	1				_
Part 3:	List Ot	thers to Be Notified Ab	oout a Debt Th	nat You Already L	isted					
5. Use th is tryin have r	is page on ng to colled nore than d		e notified about I owe to someo e debts that you	your bankruptcy, for ne else, list the orig I listed in Parts 1 or	or a debt that y jinal creditor in	Parts 1	or 2, the	n list the col	lection agend	
Part 4:		e Amounts for Each T	-							
	the amount of unsecure	ts of certain types of unse d claim.	ecured claims.	This information is	for statistical re	eporting	purpose	s only. 28 U	.S.C. §159. Ad	dd the amounts for each
		6a. Domestic support	obligations			6a.	¢	Total Cl		
		oa. Domestic support	บมแนสแบบโร			ua.	Φ			_

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Debtor 1	Latanya D	Crosby
----------	-----------	--------

Case number (if know)

Total					0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
nomii are i	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 	0.00
				· —	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Т	otal Claim
Total	6f.	Student loans	6f.	\$	0.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	1,793.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	1,793.00

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Fill in this infor					
Debtor 1	Latanya D Crosby	/			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAND			
Case number					
(if known)					☐ Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	rerson or	Name, Number	r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

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Fill in this	s information to identify your c	ase:			
Debtor 1	Latanya D Crosby	Middle None	Loot Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	DISTRICT OF MARYLA	AND		
Case num (if known)	nber				☐ Check if this is an amended filing
	l Form 106H dule H: Your Code	btors			12/15
people are ill it out, a	s are people or entities who are e filing together, both are equa and number the entries in the b e and case number (if known).	lly responsible for sup oxes on the left. Attac	plying correct informat h the Additional Page t	ion. If more space is ne	eded, copy the Additional Page,
1. Do	you have any codebtors? (If yo	ou are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
	thin the last 8 years, have you l na, California, Idaho, Louisiana, N				states and territories include
	. Go to line 3. s. Did your spouse, former spous	e, or legal equivalent liv	re with you at the time?		
in line Form	e 2 again as a codebtor only if	that person is a guarar	ntor or cosigner. Make	sure you have listed the	with you. List the person show creditor on Schedule D (Officia chedule E/F, or Schedule G to f
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP	Code		Column 2: The cred Check all schedules	litor to whom you owe the debt that apply:
3.1	Name			☐ Schedule D, line☐ Schedule E/F, lin☐ Schedule G, line☐ Schedule	e
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, lin☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	

Schedule H: Your Codebtors

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Fill	in this information to identify your o	ase.				1			
	otor 1 Latanya D (
	otor 2				_				
Uni	ted States Bankruptcy Court for the	e: DISTRICT OF MARY	LAND						
(If kr	se number		-				ded filing ment showir	ng postpetition ollowing date:	
	fficial Form 106l chedule I: Your Inc					MM / DD	YYYYY		
Be a sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you ch a separate sheet to this form. † 1: Describe Employment	sible. If two married peo are married and not filin or spouse is not filing w On the top of any additi	ng jointly, and your ith you, do not inclu	spouse i	is liv mati	ing with you, in on about your s	clude infori pouse. If m	mation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debto	r 2 or non-f	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed ■ Not employed			□ Em	ployed employed		
	employers. Include part-time, seasonal, or self-employed work.	Occupation Employer's name	Retired						
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About Mo	nthly Income							
spoi	mate monthly income as of the cuse unless you are separated.						·	·	
•	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	on for all e	emplo	,			you need
						For Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	<u> </u>	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

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Deb	tor 1	Latanya D Crosby		Case	number (if known)		
	C		4		Debtor 1	non	Debtor 2 or -filing spouse
	Copy	y line 4 here	4.	\$_	0.00	\$	N/A
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	0.00	\$	N/A_
	5b.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b.	\$_ \$	0.00	\$_ \$	N/A
	5c. 5d.	Required repayments of retirement fund loans	5c. 5d.	\$ _	0.00	* *	N/A N/A
	5e.	Insurance	5e.	\$ _	0.00	\$ 	N/A
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A
	8e.	Social Security	8e.	\$	0.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement income	8g.	\$	1,794.68	\$	N/A
		other sisters assistance who does			500.00		A1/A
	8h.	Other monthly income. Specify: not	_ 8h.+ _		500.00	· —	N/A
		reside in the property.		\$_	0.01	\$	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,294.69	\$_	N/A
10.		tulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,294.69 + \$_		N/A = \$ 2,294.69
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your or friends or relatives. In include any amounts already included in lines 2-10 or amounts that are not a cify:	depend		•		Schedule J. 11. +\$ 0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest ethat amount on the Summary of Schedules and Statistical Summary of Certainies					12. \$ 2,294.69 Combined
13.	Do y	vou expect an increase or decrease within the year after you file this form? No.	?				monthly income
	_	Yes. Explain:					

Official Form 106I Schedule I: Your Income page 2

Filli	n this informa	ation to identify y	our case:					
Debt		Latanya D C				Check	if this is:	
Debt	tor 2						an amended filing	ving postpetition chapter
	ouse, if filing)							the following date:
Unite	ed States Bank	ruptcy Court for the	: DISTRI	CT OF MARYLAND		N	MM / DD / YYYY	
	e number nown)							
		orm 106J						
		J: Your			Cilia a fa sa tha a h	- 41	U	12/15
info	rmation. If m	and accurate as nore space is ne n). Answer eve	eded, atta	. If two married people ar ich another sheet to this n.	form. On the top of	oth are equal any additior	nal pages, write y	or supplying correct our name and case
Part		ribe Your House	ehold					
1.	Is this a join							
	■ No. Go to		in a senar	ate household?				
	□ 105. D 00		п и осриг	ate measurola.				
	=	-	st file Offici	ial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debto	or 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						□ Yes
								□ No □ Yes
								□ No
								☐ Yes
								□ No
_	_							☐ Yes
3.		penses include of people other t	han _	No				
		d your depende		Yes				
Part	2: Estim	nate Your Ongoi	ng Monthi	ly Expenses				
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of suc icial Form 10		d have inc	cluded it on Schedule I: \	our Income		Your expe	enses
4.		or home owners		uses for your residence. I or lot.	nclude first mortgage	e 4. \$		613.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner'	s, or renter	's insurance		4b. \$		0.00
				upkeep expenses		4c. \$		0.00
_		owner's associa			ma aquitu la aaa	4d. \$		279.00
5.	Additional	mortgage paym	ents for yo	our residence , such as ho	me equity loans	5. \$		0.00

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Debtor 1 La	atanya D Crosby	Case num	ber (if known)	
1 4:11:41 -			_	
. Utilities 6a. El	: ectricity, heat, natural gas	6a.	\$	200.00
	ater, sewer, garbage collection	6b.		0.00
			·	
	elephone, cell phone, Internet, satellite, and cable services	6c.	·	105.00
	ther. Specify:	6d.	· .	0.00
	nd housekeeping supplies	7.	·	245.00
Childca	re and children's education costs	8.	\$	0.00
. Clothing	g, laundry, and dry cleaning	9.	\$	25.00
Persona	al care products and services	10.	\$	35.00
1. Medical	and dental expenses	11.	\$	0.00
•	ortation. Include gas, maintenance, bus or train fare.	12.		65.00
	nclude car payments.			
	nment, clubs, recreation, newspapers, magazines, and books	13.	· -	0.00
	ole contributions and religious donations	14.	\$	0.00
5. Insuran				
	nclude insurance deducted from your pay or included in lines 4 or 20.		•	
	fe insurance	15a.		0.00
15b. He	ealth insurance	15b.	\$	0.00
15c. Ve	ehicle insurance	15c.	\$	145.00
15d. O	ther insurance. Specify:	15d.	\$	0.00
6. Taxes. [Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:		16.	\$	0.00
	ent or lease payments:		•	
	ar payments for Vehicle 1	17a.	· · · · · · · · · · · · · · · · · · ·	391.00
	ar payments for Vehicle 2	17b.	· <u> </u>	0.00
17c. O	ther. Specify:	17c.	\$	0.00
	ther. Specify:	17d.	\$	0.00
	yments of alimony, maintenance, and support that you did not report		\$	0.00
	ed from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106l ayments you make to support others who do not live with you.	ı).	\$	0.00
Specify:		19.	Ψ	0.00
	eal property expenses not included in lines 4 or 5 of this form or on Sc		our Income	
	ortgages on other property	20a.		0.00
	eal estate taxes	20b.	·	0.00
			·	
	roperty, homeowner's, or renter's insurance	20c.	·	0.00
	aintenance, repair, and upkeep expenses	20d.	· <u> </u>	0.00
	omeowner's association or condominium dues	20e.		0.00
1. Other: S	Specify:	21.	+\$	0.00
2. Calculat	te your monthly expenses			
	d lines 4 through 21.		\$	2,103.00
	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	2,100.00
		_	·	0.400.00
22C. ACC	d line 22a and 22b. The result is your monthly expenses.		\$	2,103.00
3. Calculat	te your monthly net income.			
23a. Co	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,294.69
	opy your monthly expenses from line 22c above.	23b.	-\$	2,103.00
	ubtract your monthly expenses from your monthly income.	220	\$	191.69
Th	ne result is your monthly net income.	23c.	Ψ	131.03
4. Do vo u	expect an increase or decrease in your expenses within the year after	vou file this	form?	
For exam	ple, do you expect to finish paying for your car loan within the year or do you expect y			e or decrease because of a
modificati	on to the terms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

Fill in this inf	ormation to identify your	case:			
Debtor 1	Latanya D Crosby	1			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	DISTRICT OF MARYLAND			
Case number (if known)					☐ Check if this is an amended filing
	orm 106Dec	n Individual D	abtarla C	م ماريام م	
Declara	ation About a	n Individual D	eptor's 5	cnedules	12/15
You must file obtaining more years, or both	this form whenever you fi	n connection with a bankrup	amended schedule	s. Making a false sta	tement, concealing property, or 000, or imprisonment for up to 20
Did you	pay or agree to pay some	one who is NOT an attorney	to help you fill out	bankruptcy forms?	
■ No					
☐ Yes	. Name of person				nkruptcy Petition Preparer's Notice, nn, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the summa	ry and schedules fil	led with this declarat	ion and
X /s/ L	atanya D Crosby		X		
Lata	nya D Crosby ature of Debtor 1		Signature of	of Debtor 2	
Date	November 10, 2017		Date		

31	l in this inform	nation to identify your								
De	btor 1	Latanya D Crosh	Middle Name	Last Name						
1	btor 2 ouse if, filing)	First Name	Middle Name	Last Name						
Un	ited States Bar	nkruptcy Court for the:	DISTRICT OF MARYLAN	ID						
	se number				_	Check if this is an mended filing				
St	as complete a	of Financial		re filing together, both are	ankruptcy equally responsible for sup					
	<u> </u>	n). Answer every ques								
	-		rital Status and Where You	Lived Before						
1.	wnat is your	current marital statu	5?							
	☐ Married■ Not mar	ried								
2.	During the la	During the last 3 years, have you lived anywhere other than where you live now?								
	■ No □ Yes. Lis	t all of the places you li	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .					
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3. stat					ity property state or territor ico, Texas, Washington and V					
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	fficial Form 106H).						
Pa	rt 2 Explai	n the Sources of You	r Income							
4.	Fill in the tota	I amount of income you	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?				
	□ No									
	Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
	r last calenda nuary 1 to De	r year: cember 31, 2016)	■ Wages, commissions, bonuses, tips	\$7,434.00	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Official Form 107

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Debtor 1 Latanya D Crosby			у	Case number (if known)					
			De	ebtor 1		Debtor 2			
				ources of income neck all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)	
		dar year before December 31, 2	015 \	Wages, commissions, onuses, tips	\$15,249.00	☐ Wages, community bonuses, tips	missions,		
				Operating a business		☐ Operating a b	ousiness		
5.	Include include and other winnings. List each s	come regardless public benefit pay If you are filing a	of whether ti yments; pen joint case ar ross income	hat income is taxable. Exa sions; rental income; inter nd you have income that y	previous calendar years amples of other income are est; dividends; money colle ou received together, list it tely. Do not include income	alimony; child suppo ected from lawsuits; r only once under De	royalties; and btor 1.		
			Do	ebtor 1		Debtor 2			
			Sc	purces of income escribe below.	Gross income from each source (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)	
		1 of current ye iled for bankrup		etirement Income	\$25,204.40				
	or last calen anuary 1 to	dar year: December 31, 2		etirement Income	\$27,168.00				
		dar year before December 31, 2		etirement Income	\$26,971.00				
Pa	rt 3: List	Certain Payme	nts You Ma	de Before You Filed for	Bankruptcy				
6.	Are either ☐ No.	Neither Debtor	1 nor Debt	ebts primarily consumer or 2 has primarily consustantly, family, or household	i <mark>mer debts.</mark> Consumer del	ots are defined in 11	U.S.C. § 10 ⁴	(8) as "incurred by an	
		– ~	ays before y	ou filed for bankruptcy, di	d you pay any creditor a tot	tal of \$6,425* or mor	e?		
		☐ Yes List painot	d that credito include pay	or. Do not include paymer ments to an attorney for the	d a total of \$6,425* or more its for domestic support obl nis bankruptcy case. s after that for cases filed o	igations, such as chi	ild support a	nd alimony. Also, do	
	■ Yes.			oth have primarily consurou filed for bankruptcy, di	mer debts. d you pay any creditor a tot	tal of \$600 or more?			
		■ No. Go	to line 7.						
		incl	ude paymer		d a total of \$600 or more ar bligations, such as child su				
	Creditor'	s Name and Ado	dress	Dates of payme	nt Total amount	Amount you still owe	Was this p	ayment for	

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Case number (if known)

7.	Within 1 year before you filed for bankrupture insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen- control, or owner of 20% or	eral partners; partner r more of their voting	erships of which y g securities; and a	ou are a genera any managing ag	l partner; corporation gent, including one fo
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
В.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on	account of a de	bt that benefited an
	■ No					
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you		his payment
			paid	still owe	Include credi	tor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupte. List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
	Lake Pointe at Towne Centre Condo v.	Civil sheriffs sale of condominium	MD District Co County Bowie, MD 207		■ Pending □ On appea	
	Crosby, Latonya 050200063252016		DOWIE, MD 207	20	☐ Conclude	ed
10.	Within 1 year before you filed for bankrupt. Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address	cy, was any of your prope N. Describe the Property Explain what happened		oreclosed, garn		, seized, or levied? Value of the property
11	Within 90 days before you filed for bankrup			ancial institutio	n set off any a	mounts from your
11.	accounts or refuse to make a payment bec		duling a ballk of fil	ianciai msiituuo	n, set on any a	nounts from your
	☐ Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess	ion of an assign	ee for the bene	fit of creditors, a
	No					
	☐ Yes					

Debtor 1 Latanya D Crosby

DC	Latallya D Glosby		OddC Humber	(II KIIOWII)	
Par	t 5: List Certain Gifts and Contribution	ns			
3.	Within 2 years before you filed for bankı	ruptcy,	, did you give any gifts with a total value of more	than \$600 per person	?
	■ No				
	Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	i			
14.	Within 2 years before you filed for banks ■ No	ruptcy,	did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or o	contribu	ution.		
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	or gambling? ■ No □ Yes. Fill in the details.		or since you filed for bankruptcy, did you lose any		
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property
			arioe dialine dri line de di denodale 142. I reperty.		
Par	t 7: List Certain Payments or Transfer	S			
16.	consulted about seeking bankruptcy or	prepai	did you or anyone else acting on your behalf pay ring a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	□ No ■ Yes. Fill in the details.				
			Description and value of any manager	Data manuscrat	Amazunt al
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	David H. Sandler & Associates 8401 Corporate Drive Suite 620 Landover, MD 20785 davidsandler@msn.com elderly mother of client	. • •	Attorney Fees and filing fee	11/06/2017	\$1,310.00
7 .		ditors	did you or anyone else acting on your behalf pay or to make payments to your creditors? sted on line 16.	or transfer any prope	rty to anyone who
	■ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Debtor 1	Latany	a D	Crosby	,
----------	--------	-----	--------	---

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. \[\sum_{\text{n}} \text{No} \]					
	Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and vo		payme	ibe any property or ents received or debts n exchange	Date transfer was made
	Latanya Crosby 9716 Lake point Court #301 Upper Marlboro, MD 20774	funds request fr retirement-\$800		from to sus	funds requested Allianz retirement spend sheriffs sale me, funds not yed yet	11/01/17
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.					
	Name of trust	Description and value of the property transferred		Date Transfer was made		
Par 20.	List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No					
			_			
		ast 4 digits of account number	Type of accourtinstrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	cash, or other valuables?					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe (the contents	Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe t	the contents	Do you still have it?

Debtor 1	Latanva	D	Cro	shv

Case number (if known)

Par	t 9: Identify Property You Hold or Control for	Someone Else				
23. Do you hold or control any property that someone else owns? Include any property you borrowed from for someone.			rty you borrowed from, are storing fo	r, or hold in trust		
	■ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value		
Par	t 10: Give Details About Environmental Inform	ation				
For	the purpose of Part 10, the following definitions	apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, groun	<u> </u>			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	l sites.				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,		
Rep	ort all notices, releases, and proceedings that you know about, regardless of when they occurred.					
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.					
	■ No					
	Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	rt 11: Give Details About Your Business or Connections to Any Business					
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
	☐ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation					

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Case number (if known)

	■ No. None of the above applies. Go to	Part 12.	
	☐ Yes. Check all that apply above and fill	I in the details below for each business.	
	Business Name	Describe the nature of the business	Employer Identification number
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.
		·	Dates business existed
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to ar	nyone about your business? Include all financial
	■ No		
	☐ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	t 12: Sign Below		
are t		false statement, concealing property, or o	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
	Latanya D Crosby		
	anya D Crosby nature of Debtor 1	Signature of Debtor 2	
Date	November 10, 2017	Date	
Did v	you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
■ N			, , , , , , , , , , , , , , , , , , , ,
ПΥ	es		
Did v	you pay or agree to pay someone who is no	t an attorney to help you fill out bankruptc	y forms?
■ N			•
ПΥ	es. Name of Person . Attach the Bankru	uptcy Petition Preparer's Notice, Declaration, a	and Signature (Official Form 119).

Debtor 1 Latanya D Crosby

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Maryland

		District of Maryland		
In re	Latanya D Crosby		Case No.	
		Debtor(s)	Chapter	13
	VERI	IFICATION OF CREDITOR I	MATRIX	
he ab	ove-named Debtor hereby verifies t	that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
Date:	November 10, 2017	/s/ Latanya D Crosby		
		Latanya D Croshy		

Signature of Debtor

Capital One Auto Finance Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Discover Financial Po Box 3025 New Albany, OH 43054

Lake Pointe at Towne Centre Condo c/o Linda Mericle 7600 Hanover Pkwy Suite 202 Greenbelt, MD 20770

Nationstar Mortgage LLC Attn: Bankruptcy 8950 Cypress Waters Blvd Coppell, TX 75019